DISTRICT OF COLUMBIA GOVERNMENT



EMPLOYMENT APPLICATION (DC2000)

Please answer the questions and complete all required fields on this application. In addition, please respond to all of the ranking factors listed in the vacancy announcement. Finally, if you are claiming residency preference for a career service or management supervisory service position, please complete the residency preference form.

1. POSITION VACANCY INFORMATION				
Position Title		V	acancy Announc	ement #
	2. PERSON	AL DATA		
Last Name	First I	Name	Mid	dle Name
Street A	ddress			Apt#
City	State	Zip Code		Ward
Telephone (including area code):	Но	me	В	usiness
Other Names Ever Used	Social Secu	ırity Number	Dat	te of Birth
Email		printed, signed and fithe vacancy annou		me and address
3. D.C. EMPLOYMENT HISTORY AND AVAILABILITY				
a. Are you now or were you ever employ	ed by the District of	Columbia Governme	ent?	_
 b. Mark below each type of current or pr Temporary Career Management Supervisory Service c. List highest grade, classification serie Grade 	☐Term ☐Excepted ☐Legal Ser	Service	☐Perm ☐Exect	le boxes. anent utive Service
When can you start work?		Lowest pay or grade	e you will accept	
	4. RESII	DENCY		
 a. Are you claiming a residency preference b. I understand the residency preference c. If the position you are applying for about Supervisory Service, or Legal Service are you claiming a residence preference complete the Residency Preference for d. If the position you are applying for about Senior Executive Attorney Service, do you must be a domiciliary of the District within 180 days of the appointment day the appointment? 	e requirements (found ove is in the Career S e, excluding the Senic ice? (If you claim res or Employment form, ove is in the Excepted o you acknowledge ar ct of Columbia at the	d at the end of this do Service, Managemen or Executive Attorney sidency preference, y DC-2000RP). d Service, Executive nd understand that, is time of the appointn	y Services, you must Service, or if selected, ment or	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No

5. MILITARY SER	RVICE AND VETERANS PREFERENCE	
	d veterans, to veterans who served on active duty to the spouses, widows, widowers, or mothers of	
Have you ever served on active duty in the United (Answer "NO" if your only active duty was for training, includir National Guard.)		☐ Yes ☐ No
Did you or will you retire at or above the rank of n (If "YES," you are not eligible for veterans preference unless y connected disability.)		☐ Yes ☐ No
Dates of Active Duty Service: From To (Month/Day/Y		Character of Separation
Campaign or Expeditio	 nary Medals Received	Separation Date
Preference Claimed: ☐ 5-point prefer (Please check one. You must show proof when	rence	☐ None
	6. EDUCATION	
a. High School		
Indicate highest grade completed:		
Name and Address of School		Zip Code
Did you graduate? Yes No If no Attended From To (month/year)	o, have you received a GED high school equivaler	ncy? ☐ Yes ☐ No
b. Colleges and Universities		
School 1		
Indicate highest degree(s) obtained (e.g., A.A., I	B.S.):	
Name and Address of College or University	Zip Code	
Major	Minor	
Major Semester Credit Hours Attended From To (month/year)	OR Major Quarter Credit Hours	
School 2		
Indicate highest degree(s) obtained (e.g., A.A., I	B.S.):	
Name and Address of College or University	Zip Code	
Major	Minor	
Major Semester Credit Hours	OR Major Quarter Credit Hours	
Attended From To (month/year)		

7. TRAINING				
List relevant training, licenses or skills (e.g., sign language). Incawarded, dates attended, number of credit hours, major/minor f	clude schools attended	, addresses, certificate d.	es or degrees	
8. LANGUAGE (List the languages you speak, read and write	SAPABILITIES			
Language ————————————————————————————————————	Speak	Read	Write	
9. WORK EXPERIENCE – If you have no work experience, write "NONE." List paid or unpaid work experience relevant to the position for which you are applying. No Work Experience				
Employer's Name Address	Dates of Employment (Month/Year) From To	Annual Salary Starting \$ Final \$	Average Hours Per Week	
Telephone	Name and Title of Su	ıpervisor		
Reason for Leaving	No. of Employees Su	ıpervised		
If District or Federal Employment, List Series, Grade or Rank and Job Title and Duties, Responsibilities and Accomplishments	and Date of Last Prom	otion		

POSIT	ΓΙΟΝ:			
Employer's Name Address	Dates of Employment (Month/Year) From To	Annual Salary Starting \$ Final \$	Average Hours Per Week	
Telephone	Name and Title of Supervisor			
Reason for Leaving	No. of Employees Supervised			
If District or Federal Employment, List Series, Grade or Rank and Date of Last Promotion				
Job Title and Duties, Responsibilities and Accomplishment				
POSITION:				
Employer's Name	Dates of Employment (Month/Year)	Annual Salary	Average Hours Per Week	
Address	From To	Starting \$ Final \$		
Telephone	Name and Title of Supervisor			
Reason for Leaving	No. of Employees S	upervised		
If District or Federal Employment, List Series, Grade or Rai	nk and Date of Last Pr	omotion		
Job Title and Duties, Responsibilities and Accomplishment	S			

POS	ITION:		
Employer's Name Address	Dates of Employment (Month/Year) From To	Annual Salary Starting \$ Final \$	Average Hours Per Week
		, ,	
Telephone	Name and Title of Supervisor		
Reason for Leaving	No. of Employees Supervised		
If District or Federal Employment, List Series, Grade or R	ank and Date of Last P	romotion	
Job Title and Duties, Responsibilities and Accomplishmer	113		
	ITION:		
POS Employer's Name	Dates of Employment (Month/Year)	Annual Salary	Average Hours Per Week
	Dates of Employment	•	Hours
Employer's Name Address	Dates of Employment (Month/Year) From To	Salary Starting \$ Final \$	Hours
Employer's Name Address Telephone	Dates of Employment (Month/Year) From To Name and Title of S	Salary Starting \$ Final \$ Supervisor	Hours
Address Telephone Reason for Leaving	Dates of Employment (Month/Year) From To Name and Title of S	Salary Starting \$ Final \$ Supervisor Supervised	Hours
Address Telephone Reason for Leaving If District or Federal Employment, List Series, Grade or Reason for Leaving	Dates of Employment (Month/Year) From To Name and Title of S No. of Employees S ank and Date of Last P	Salary Starting \$ Final \$ Supervisor Supervised	Hours
Address Telephone Reason for Leaving	Dates of Employment (Month/Year) From To Name and Title of S No. of Employees S ank and Date of Last P	Salary Starting \$ Final \$ Supervisor Supervised	Hours
Address Telephone Reason for Leaving If District or Federal Employment, List Series, Grade or Research Control of the	Dates of Employment (Month/Year) From To Name and Title of S No. of Employees S ank and Date of Last P	Salary Starting \$ Final \$ Supervisor Supervised	Hours
Address Telephone Reason for Leaving If District or Federal Employment, List Series, Grade or Research Control of the	Dates of Employment (Month/Year) From To Name and Title of S No. of Employees S ank and Date of Last P	Salary Starting \$ Final \$ Supervisor Supervised	Hours
Address Telephone Reason for Leaving If District or Federal Employment, List Series, Grade or Research Control of the	Dates of Employment (Month/Year) From To Name and Title of S No. of Employees S ank and Date of Last P	Salary Starting \$ Final \$ Supervisor Supervised	Hours

10. BACKGROUND INFORMATION – You must answer each question in this section before we can process your application.

When answering item "a," you may omit: 1) traffic fines; 2) finally decided in juvenile court or under a youth offender la Corrections Act or similar state law; and 4) any conviction law. We will consider the date, facts, and circumstances of considered for District jobs.	whose record was expunged under federal, state, or local
a. During the past 10 years have you been: 1) convicted of	
convicted by a court-martial ? A felony is defined as any violation of law punishable by impacalled a misdemeanor under State, county, or local law, whi	
IF YOU ANSWERED "YES" TO "a," GIVE DETAILS IN THE	HE SPACE BELOW. For each violation, write the 1) date;
2) charge; 3) place of violation; 4) court; and 5) action take	en by the court.
b. Do any of your relatives work for the District of Columbia wife, son, daughter, brother, sister, uncle, aunt, first cousin, son-in-law, daughter-in-law, brother-in-law, sister-in-law, stepsister, half brother, and half sister.	niece, nephew, father-in-law, mother-in-law,
If "YES," in the space below, write for each of these relative the District of Columbia government in which the person we	
c. Do you receive or have you ever applied for retirement pa Columbia government or federal civilian or military service?	
SALARY REDUCTION OF REEMPLOYED ANNUITANTS government on or after January 1, 1980, who is receiving a	S: An individual selected for employment in the District
d. Are you a citizen of the United States?	☐ Yes ☐ No
e. Are you legally authorized to work in the United States?	☐ Yes ☐ No
To work for the District of Columbia government in certain States. If selected, you will be required to submit evidence	public safety positions, you must be a citizen of the United e of identity and employment eligibility.
11. SIGNATURE, CERTIFICATION,	, AND RELEASE OF INFORMATION
	icial Code § 22-2405 <i>et seq.</i> (2001). I understand that any Mayoral order. I consent to the release of information employment by employers, schools, law enforcement gators, personnel staffing specialists, and other authorized
Sign	Date

RANKING FACTORS		
Name	Vacancy Announcement #	
wage grade. All applicants MUST respondence that achievements from your experience that determined to be of importance for the particular particular activities, etc. that abilities described in the ranking factors accurate to the best of your knowledge. FROM CONSIDERATION.	y announcement will be used in the evaluation process for all positions other than and to the ranking factors. Please describe specific incidents of sustained to show evidence of the level at which you meet the ranking factors that have been position for which you are applying. You may refer to any experience, education, that include the degree to which you possess the job related knowledge, skills, and an anti-control of the ranking factors should be complete and FAILURE TO RESPOND TO ALL RANKINGFACTORS MAY ELIMINATE YOU thanking factors on the job vacancy announcement.	
ose the spaces below to respond to the		
	Ranking Factor 1	
	Ranking Factor 2	
	Ranking Factor 3	
	Ranking Factor 4	
	Ranking Factor 5	
	Ranking Factor 6	

If you are claiming residency preference, please complete the next page.

DISTRICT OF COLUMBIA GOVERNMENT

RESIDENCY PREFERENCE FOR EMPLOYMENT

This form must be filled out and submitted with each application for competitive appointment to a position in the Career Service, Management Supervisory Service, or Legal Service, excluding the

NOTICE:

Personnel Office Representative

Senior Executive Attorney Service. Preference, if applicable, will not be granted unless this form is completed and received at the time of application. Social Security Number _____ Name ____ Position Applied for Vacancy Announcement Number CHECK ONLY ONE OF THE FOLLOWING STATEMENTS I, the undersigned, am currently a District government employee whose service began on or before December 31, 1979 and has been continuous since that date. I understand that I will not be required to submit proof of, establish or maintain residency as a result of receiving preference. I, the undersigned, am a former employee of the U.S. Department of Health and Human Services at St. Elizabeths Hospital who accepted employment with the District government, without a break in service, effective October 1, 1987. My service with the District government has been continuous since that date. I understand that I will not be required to submit proof of, establish or maintain residency as a result of receiving preference. III. I, the undersigned, am not a bona fide District resident and I understand that I am not entitled to claim a residency preference. IV. I, the undersigned, am a bona fide District resident and I do NOT claim a residency preference. I, the undersigned, am a bona fide resident of the District of Columbia and claim a residency preference in applying for the position indicated above. My current address is: I understand that, if selected for this position, I will be required to submit proof of bona fide District residency and to maintain bona fide District residency for a period of five (5) consecutive years from the date of appointment or promotion. FOR OFFICIAL USE ONLY Applicant's Signature Preference Applied Preference Not Applied—State Reason Date (Month, Day, Year)

FACTS ON RESIDENCY PREFERENCE

- An applicant for competitive appointment to a position in the Career Service, Management Supervisory Service, or Legal Service, excluding the Senior Executive Attorney Service, who is bona fide resident of the District AT THE TIME OF APPLICATION may claim a hiring preference over a non-resident applicant.
- An employee who applies for a competitive promotion in the Career Service, Management Supervisory Service, or Legal Service, excluding the Senior Executive Attorney Service, and who is a bona fide resident of the District may claim a residency preference AT THE TIME OF APPLICATION.
- Residency preference is to be claimed by completing the front of this form and submitting it with the employment application.
- A bona fide District resident who does NOT claim a residency preference at the time of application, if found to be qualified, will be rated and ranked but will NOT receive any preference in the appointment. If selected, the individual is not required to maintain District residency.
- Generally, residency preference is awarded as follows:
 - Five (5) points will be added to the rating and ranking score of each qualified applicant who claims a hiring preference upon application for employment in the Career Service or the Management Supervisory Service.
 - Except for promotional examinations (e.g., police officers, firefighters, and correctional officers), five (5) points will be added to the rating and ranking score of each employee who claims or is entitled to preference upon application for a competitive appointment/promotion, <u>only</u> when there is at least one (1) qualified outside applicant for the position who claims a hiring preference.
 - Residency preference candidates will be selected ahead of equally qualified non-preference candidates.
- A person who claims a residency preference and is selected for the position must agree in writing no later than the date of appointment to maintain residency for a period of five consecutive years from the effective date of his or her appointment. Failure to maintain bona fide District residency will result in forfeiture of employment.
- The requirement to maintain bona fide District residency is applicable ONLY to applicants and employees who claim a residency preference and are selected for a position in the Career Service or the Management Supervisory Service.
- Any person who was employed by the District of Columbia government on December 31, 1979, and who is still employed by the District of Columbia government without having had a break in service of one (1) workday or more since that date or, pursuant to the provisions of Public Law 98-621, any former employee of the U.S. Department of Health and Human Service at St. Elizabeths Hospital who accepted employment with District government without a break in service effective October 1, 1987, will be granted a residency preference upon application for a COMPETITIVE promotion in the Career Service or the Management Supervisory Service if at least one (1) qualified applicant for the position has claimed a residency preference. If selected, the employee is not required to established or maintain District residency.
- An employee who is under a five-year (5-year) residency requirement, who claims a residency preference in applying for a competitive promotion in the Career Service or the Management Supervisory Service, and is selected will be required to begin a new five-year (5-year) residency requirement effective with the date of the new appointment.